



PATENT

3000240-703483-2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Inventors: Patrick E. McCallister *et al.*

App. No: 09/965,300

Filing Date: September 28, 2001

Title: MICROWAVEABLE PASTA
PRODUCT

Prior Docket No.: C944 45105

New Docket No.: 703483-2001

Art Unit: 1761

Examiner: S. Weinstein

CERTIFICATE OF MAILING
UNDER 37 CFR § 1.8

Date of Deposit: October 29, 2003

I hereby certify that this paper and all enclosures
are being deposited with the United States Postal Service
as first class mail on the date indicated above in an
envelope addressed to Commissioner for Patents, Box
1450, Alexandria, Virginia 22313-1450.

Type or Print Name of Person Mailing: Karen Wuerfel


Signature of Person Mailing

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

PETITION AND FEE FOR EXTENSION OF TIME
(37 C.F.R. § 1.136(a))

RECEIVED

NOV 12 2003

GROUP 1700

Sir:

Pursuant to 37 C.F.R. § 1.136(a), Applicants hereby petition for a two (2) month
extension of time to respond to the Office Action mailed on June 5, 2003.

1. The communication in connection with the matter for which this extension is requested

- a. ☒ is filed herewith; or
b. ☐ has been filed on _____.

2. ☐ Applicant(s) claim Small Entity Status under 37 CFR § 1.27.


3. The following fees are submitted:

	TOTAL MONTHS REQUESTED	OTHER THAN SMALL ENTITY	SMALL ENTITY	CALCULATIONS
a. <input type="checkbox"/>	one month	\$110.00	\$55.00	\$
b. <input checked="" type="checkbox"/>	two month	\$420.00	\$200.00	\$ 420.00
c. <input type="checkbox"/>	three month	\$920.00	\$460.00	\$
d. <input type="checkbox"/>	four month	\$1,440.00	\$720.00	\$
e. <input type="checkbox"/>	five month	\$1,960.00	\$980.00	\$
f. <input type="checkbox"/>	An extension for ____ months has already been secured for filing the above-identified communication and the fee paid therefor of \$____ is deducted from the total fee due for the total months of extension now requested. The fee for this extension (\$____), minus the fee previously paid (\$____) equals \$____ (total fee due).			\$
TOTAL FEES =				\$ 420.00

- ☐ A check in the amount of \$420.00 to cover the above fees is enclosed.
- ☒ Please charge Deposit Account No. 50-2518, Docket No. 703483-2001, in the amount of \$420.00 to cover the above-fees. *A duplicate copy of this sheet is enclosed.*
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-2518, Docket No. 703483-2001. *A duplicate copy of this sheet is enclosed.*

DATE: October 29, 2003

Respectfully submitted,
BINGHAM MCCUTCHEN LLP

By: 
Gary D. Lueck
Registration No.: 50,791

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